HUGHLINGS JACKSON CENTENARY

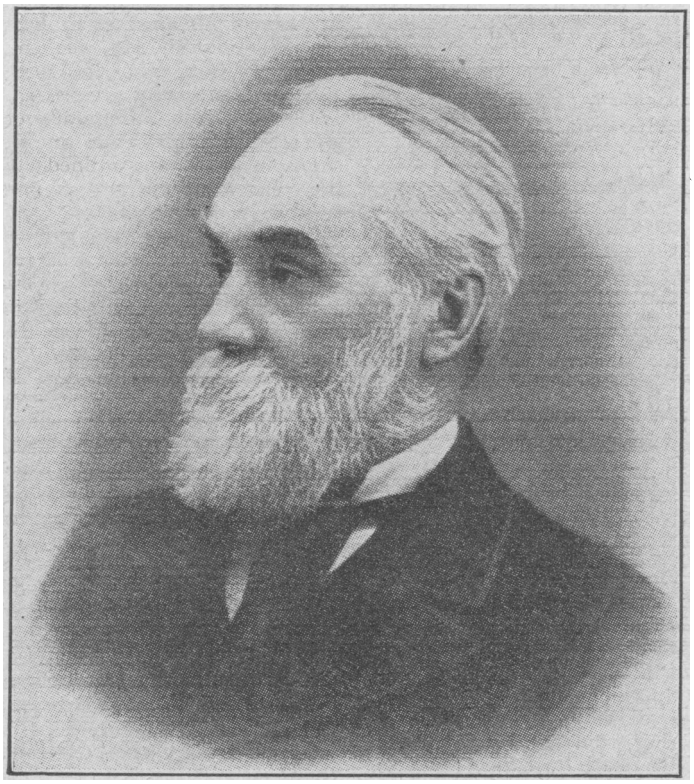
A COMMEMORATIVE DINNER

On April 4th, 1835, Hughlings Jackson was born in the village of Green Hammerton, Yorkshire, and a hundred years later on the same day a company of neurologists, including several who had known him personally and had been his disciples, assembled in London to do honour to his memory. The commemorative dinner was organized by the Section of Neurology of the Royal Society of Medicine, and the guests included two original members of the Neurological Society of London, of which Jackson was first president—namely Sir Thomas Barlow and Sir William Hale-White.

THE PRESIDENT'S SPEECH

Dr. S. A. Kinnier Wilson, who presided, spoke in a spirit of delightful reminiscence of his friendship with Jackson for "a few precious years." When he, a young student, went to Queen Square at the end of 1904, Jackson was already on the threshold of seventy, and though he came to the hospital frequently he never stayed long.

"I loved Dr. Jackson, and more or less attached myself to him. I saw more of him than anyone of my generation, and I yielded to none in my appreciation and affection. It is difficult to say exactly what it was in Jackson that made the appeal. Partly, no doubt, seniority, which I had been brought up to respect. But it was his philosophic theorizing that fascinated one. I never knew him in his heyday, but even in age the stimulus of his mind was deeply felt."



Dr. Kinnier Wilson said that he made a practice of writing down Jackson's conversations — the only man he had ever Boswellized. He was accustomed to go on drives with him in his carriage and pair, when Jackson would utter remarks of penetrating insight or playful humour, and, returning, the young disciple would commit them to paper. He gave some interesting extracts from these casual memoirs. Some of them touched on Jackson's interest in speech defects. He mentioned that Emerson was aphasic before he died, and called for "the thing with four legs," having lost the word "table." Spoonerisms (which, according to another speaker, Jackson attributed to "hurry of the right hemisphere") especially interested him. He pointed out that Spoonerisms might relate to ideas as well as phrases, and told of a man who went to a dentist and was asked to open his mouth that the dentist might insert his finger. "No," said he, "you might bite it." Some of Jackson's chance remarks were illuminating—for example, his description of the writing of Carlyle as "glorified swearing." With a few eloquent words about his old chief, Dr. Wilson gave the toast "Jackson," which was honoured in silence.

OTHER RECOLLECTIONS

Dr. James Taylor, who worked with Jackson at Queen Square, exhibited some Jacksonia—photographs, drawings, and other documents, especially postcards, which Jackson favoured for correspondence. He also related some personal impressions. Jackson was subject to migraine, and on one occasion when Taylor was approaching, Jackson waved him off: "Stop! I am just observing my migraine." Dr. Wilfred Harris exhibited three of Jackson's letters which had been lent him by the General Medical Council. One was a request by Jackson, who had qualified M.R.C.S., L.S.A., in 1856, to be registered under the new Act of 1858. Jackson, said Dr. Harris, did not "suffer from over-education"; he once, indeed, expressed his thankfulness that he had never been to a university. It left his mind more free to pursue its own avenues of thought. His natural bent was to philosophy, and he took Herbert Spencer as his model. He was remarkable for his concentration, careful observation, and unprejudiced recording. In some respects he might be called lazy; he had no patience for the spade work of experimental physiology, and perhaps for the same reason he never wrote a textbook, though responsible for 300 papers, all bearing on neurology in some form or other, from philosophical speculation to the psychology of a joke. His creed was a mild agnosticism, his logical brain refusing to permit him to believe in a future state. For the thirty years following his wife's death—she, by the way, had attacks of Jacksonian epilepsy—he lived a solitary, bachelor-like existence. Dr. Harris showed Jackson's indirect ophthalmoscope—a curious instrument lighted by an oil flame burnt inside the tube.

Professor K. H. Bouman, professor of psychiatry and neurology at Amsterdam, in a graceful tribute, said that in his country Jackson's name was the pre-eminent one in neurology, and presented to the president a book with Jackson's signature in it. Dr. A. M. Douglas from New Zealand, a grandnephew of Jackson by marriage, added a few words of appreciation on behalf of the many connexions of Jackson on the other side of the globe. Sir Farquhar Buzzard, whose father was one of Jackson's great friends, told how it was a tradition in his family that Jackson saw the future Regius Professor a few days after his birth and demonstrated on him how a baby could be lifted by the grasp of its fingers. The last of these informal speeches was by Professor Edwin Bramwell. Jackson, he said, was an elusive personality, one whose reserved manner and sensitive temperament made intimacy difficult. He gave a little picture of his last years at Queen Square. He would arrive in the hall and ask

if there was anything to interest him ; his attention would be directed to some point on which he might spend five minutes or half an hour, and then he would leave and return in an hour or two with some paper elucidating the point under discussion. Of the personal influences which went to the shaping of Jackson, Professor Bramwell mentioned the teaching of Sir James Paget, the friendship of Sir Jonathan Hutchinson, and his association with the brilliant Brown-Séquard. But he was inclined to think that the greatest impression was made at an earlier time by Thomas Laycock, a remarkable personality, who wrote books which to-day were well worth reading, notably his *Nervous Diseases of Women*. Laycock left the York School of Medicine, where Jackson was educated, when his student was only 20 years of age, but the mental outlook of the two men was so similar that some lasting influence must have been imparted.

[The photograph is reproduced by kind permission of Dr. Gordon Holmes, Editor of *Brain*.]

HEALTH OF SCOTLAND

The sixth annual report of the Department of Health for Scotland,[1] dealing with the year 1934, shows several features of continued improvement of health in the Scottish population. Both the general mortality and the infant and tuberculosis death rates were lower than they had ever been before, and as shown by the Report upon Incapacitating Sickness among the Insured Population, published in the *British Medical Journal* of March 30th, 1935 (p. 666), there was less incapacity from sickness than in previous years. On the other hand, the maternal mortality in childbirth remains much as before, and the death rates from diseases of the heart, cancer, etc., which are particularly characteristic of later life, have continued to increase. The report points out that the birth rate and death rate are now little more than one-half of what they were sixty years ago. This implies that there are relatively fewer young people in the country, and that in future there will be still fewer. As a result the death rate from the conditions incidental to advanced years may be expected to rise, and this will be still further influenced by the recent introduction of successful treatment for such conditions as diabetes and pernicious anaemia, so that persons suffering from these now die at a later age than formerly. The death rate in 1934 was 12.9 per 1,000, the principal causes of death being heart disease (11,427 deaths), malignant tumours (7,558), cerebral haemorrhage (6,618), pneumonia (4,533), and tuberculosis (3,704). While the number of deaths from cancer continues to rise, it is believed that when the ageing of the population and improved diagnosis are taken into consideration, these factors are sufficient to account for the increase. The large Scottish hospitals are co-operating with the Radium Commission in the investigation of the cause and treatment of this disease, and in March, 1934, the Cancer Control Organization was established in the south-eastern counties to co-ordinate research, facilitate diagnosis, follow up cases, and provide grants for research and treatment. A noteworthy feature of infectious disease was the high prevalence of diphtheria, although measles was responsible for more deaths during the year than scarlet fever and diphtheria combined. Attention is drawn to the steady increase in the public demand for hospital treatment, which is not peculiar to any clinical type of case nor confined to any particular social class, and which is creating new problems of hospital provision and administration. The report emphasizes the fact that there is little evidence of any recognizable malnutrition associated with unemployment.

HOUSING

During the year under review 18,650 houses were built with State assistance, which is rather less than the output of 1933, but considerably more than that of 1932. During the year the Department approved of tenders by local authorities for 20,412 houses, which is a record, and at December 31st local authorities had begun 23,716 houses, so that an unusually high output of completed ones may be expected during 1935. Since 1919 the number of State-aided houses built is 183,390, and to these must be added 26,474 working-class dwellings built without State assistance, making a total of 209,864. These new houses contain a population of about 850,000 persons, more than one-sixth of the total population. The Royal Commission on Housing, which reported in 1917, declared that a building programme of 235,990 houses was then required, so that it is evident that the house shortage is being rapidly overtaken. The cost to the State in Exchequer subsidies from 1919 to the end of 1934 was £18,234,978. It is estimated that after allowing for the full use of all existing fit houses, over 100,000 new ones are still required to abolish overcrowding. Under the Housing (Rural Workers) Acts, and with the aid of State and local authority grants, 17,101 existing houses in rural areas were reconditioned by the end of 1934. The first place in administrative effort during 1934 was given to slum clearance, and excellent progress was made. During the year local authorities built 8,598 houses specifically to replace condemned ones, and by the end of 1934 they had under construction 20,044 houses to replace slums as against 11,193 at the end of 1933. The report points out that one of the essentials of successful slum clearance is the building of houses of three apartments and upwards. Nearly one-half of all the inhabited houses in Scotland are at present of one and two rooms, and even after slum clearance has reduced their numbers there will be no danger of a shortage of them. The Department continues to call for periodical reports of the work done by local authorities in rural areas to improve the cottages of farm servants. So far over 29,000 of these have been inspected, and 14,111 had been found unfit for habitation. Of these about 9,000 have already been improved, mostly with assistance under the Housing Acts, and 654 have been demolished or closed. Under the Town and Country Planning (Scotland) Act, 1932, some progress has been made. It is urged, however, that local authorities have not yet given a sufficient place to far-sighted planning and to avoiding the dangers of uncontrolled development. At the end of 1934 ten planning schemes had been approved by the Department and were in operation, involving about 90,000 acres. Four of these were for Glasgow, a large one covering ninety-six square miles for Aberdeen and district, three for Edinburgh, one for Dunfermline, and one for Airdrie.

GENERAL SANITATION

The demand for water supply, the report states, is progressive, for while in 1890 ten gallons per head per day were considered sufficient for domestic purposes, in 1898 fifteen gallons were regarded as the minimum, and at the present time about forty gallons are provided in most burghs, while the increasing number of houses with modern sanitary conveniences make a still rising demand. The drought of 1933 showed that the organization of supplies was defective, and in January, 1934, the Department called for reports from local authorities on the adequacy of their water supplies during the previous year. Out of 787 supplies, 300 were found to be inadequate. It was suggested with regard to these that while augmentation might be necessary in some areas, measures of conservation might be appropriate in others. As an illustration, the burgh of Kirkcaldy experienced a serious shortage of water estimated at about 2,000,000 gallons a day, while the county council at the same time had a surplus estimated at 2,890,000 gallons daily. It was hoped that progress might be made towards a joint use of supplies by neighbouring local authorities, and in 1934 two Acts of Parliament dealing with the water supply were passed giving powers to the Department for this purpose. Collection of refuse is becoming more efficient as a result of improved methods and the introduction of more suitable mechanical vehicles. This increased efficiency has often

[1] Cmd. 4837. H.M. Stationery Office, 120, George Street, Edinburgh. (3s. 6d. net.)